Case 16-20991 Doc 1 Fill in this information to identify your case:	Filed 06/28/16	Entered 06/28/16 16:54:38 age 1 of 69	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Raymundo First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's	Middle name Arebalo	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
Include your married or maiden names.	Middle name	Middle name
тышентыпес.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	S XXX - XX- 1241	
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Raymul@ase 16-20991 Doc 1 Filed 06/28/116 Entered 06/28/16 16:54:38 Desc Main Debtor 1 Page 2 of 69 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 152 Dunbar Lane UnitB Number Street Number Street 60118 Dundee Illinois City State Zip Code City State Zip Code Kane County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this district to file for Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Page 4 of 69 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Raymul@ase 16-20991

Debtor 1

Doc 1

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t Name Middle Name

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: ✓ I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of completion. completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. plan, if any. I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. My physical disability causes me to be Disability. Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main Page 6 of 69 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ר Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Raymundo Arebalo Signature of Debtor 2 Signature of Debtor 1 Executed on 6/28/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

orrect.				
/s/ Angie Harb Signature of Attorney for Debtor		Date	6/28/2016 MM / DD / YYY	Y
Angie Harb				
Printed name				
Semrad Law Firm				
Firm name				
Street				
City	State			Zip Code
Contact phone		Er	nail address	aharb@semradlaw.com
Bar number			ate	

Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main Fill in this information to identify your case: Debtor 1 Arebalo Raymundo First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$3,020.00 1b. Copy line 62, Total personal property, from Schedule A/B \$3,020.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$6,563.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$41.894.95 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$48,457.95 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2.687.23 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$2,682.00

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First Name Docume Docume Page 9 of 69

Part 4: Answer These Questions for Administrative and Statistical Records

Par	t4: Answer These Questions for Administrative and Statistical Records								
6. /	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?								
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.								
	✓ Yes.								
7. \	What kind of debt do you have?								
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual prir family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C.								
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. On this form to the court with your other schedules.	Check this box and submit							
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$4,199.05 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.								
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:								
	From Part 4 on Schedule E/F, copy the following:	Total claim							
	9a. Domestic support obligations (Copy line 6a.)	\$0.00							
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00							
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00							
9d. Student loans. (Copy line 6f.)									
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00							
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00							
	9g. Total. Add lines 9a through 9f.	\$0.00							

	Case 16-20991	Doc 1	Filed 06/28/16	<u>Entered 06/2</u> 8/16 1	.6:54:38 De	esc Main
Fill in this	information to identify your case	:				
Debtor 1	Raymundo		Areba	alo		
DCDIOI 1	First Name	Middle	Name Last N			
Debtor 2						
	if filing) First Name	Middle	Name Last N			
I Initad St	tates Bankruptov Court for the	Northern	District of II	llinois		
United St	ates Bankruptcy Court for the:	Normem		State)		
Case nun			,			
(If known)						_
Officia	al Form 106A/B					Check if this is an amended filing
						amended hilling
<u>Sche</u>	dule A/B: Prope	rty				12/1
ategory v esponsik vrite your	where you think it fits best. Be ble for supplying correct inform rname and case number (if kno	as complete an nation. If more s own). Answer ev	nd accurate as possible. space is needed, attach very question.	n asset fits in more than one ca If two married people are filing a separate sheet to this form. Il Estate You Own or Hav	together, both are On the top of any a	equally dditional pages,
1. Do yo	u own or have any legal or equ	itable interest ir	n any residence, building	g, land, or similar property?		
V	No. Go to Part 2		, ,			
一百	Yes. Where is the property?					
			What is the property	? Check all that apply.	Do not deduct secure	d claims or exemptions. Put
1.1			_ Single-family home	t i i	the amount of any sec	cured claims on Schedule D:
	Street address, if available, or of	other description	Duplex or multi-un		Greditors Who Have	Claims Secured by Property.
			_ Condominium or co	Joberanive	Current value of th	
			Manufactured or m	obile home	entire property?	portion you own?
			Land			
	Number Street		Investment property	, [Describe the nature interest (such as fee	of your ownership simple, tenancy by
	0:		Timeshare Other		the entireties, or a l	ife estate), if known.
	City State	Zip Code				
			Who has an interest	in the property? Check one.		community property
			Debtor 1 only	Ī	(see instruction	ns)
			Debtor 2 only			
			Debtor 1 and Debtor	•		
			At least one of the	debtors and another		
			Other information yo	ou wish to add about this item,	such as local	
lf vou	own or have more than one, list h	oro:	property identification	on number:		
ii you	own of flave more than one, list in	516.	What is the property	? Check all that apply	Do not deduct secure	d claims or exemptions. Put
1.2			Single-family home	t i i	the amount of any sec	cured claims on <i>Schedule D:</i>
	Street address, if available, or o	other description	Duplex or multi-un	(Greditors Who Have	Claims Secured by Property.
			_ Condominium or co	JUDEIAUVE	Current value of th	
			Manufactured or m	obile home	entire property?	portion you own?
			Land			
	Number Street		Investment property	, <u>[</u> i	Describe the nature interest (such as fee	of your ownership e simple, tenancy by
	011	7:0.1	Timeshare Other			ife estate), if known.
	City State	Zip Code		-		
			Who has an interest	in the property? Check one.		community property
			Debtor 1 only	Ţ	(see instruction	ns)
			Debtor 2 only			
			Debtor 1 and Debto	•		
			At least one of the	debtors and another		

Other information you wish to add about this item, such as local property identification number:

Debtor 1	Raymur@ase 16-209 First Name	91 Doc 1 I	<u>Filed 06/28/16 Entered</u> 06/28/11ର Document Page 11 of 69	6/4/6/54: <u>38 Des</u>	sc Main
1.3Stre	et address, if available, or oth		hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any securic Creditors Who Have Classifications Current value of the entire property? Describe the nature of	
City	State	Zip Code	Timeshare Other	interest (such as fee sinterest, or a life	
		w C C	The has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
2. Add	the dollar value of the port	pr	ther information you wish to add about this item, soperty identification number: of your entries from Part 1, including any entries f		
				>	
Do you ov ou own the	at someone else drives. If youns, trucks, tractors, sport utili	quitable interest in a lease a vehicle, also r	any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexpes		
	Make Model: Year: Approximate mileage: Other information: 2008 Pontiac G6	Pontiac G6 2008 166000	Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$1620.00
3.2	Make Model: Year: Approximate mileage: Other information:		Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own?
			At least one of the debtors and another Check if this is community property (see instructions)		

Debtor 1	Raymul@ase 16-20991 Doc 1		മെത്ത് എം6ം 54: <u>38 Des</u>	c Main	
	First Name Middle Name	Document Page 12 of 69			
3.3	Make	Who has an interest in the property? Check	Do not deduct secured cl	·	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Claims Secured by Property.		
	Approximate mileage:	Debtor 2 only	Current value of the Current value of the		
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
3.4	Make	Who has an interest in the property? Check	Do not deduct secured claims or exemptions. Put		
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
4.1	Yes Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
4.1		Who has an interest in the property? Check	Do not deduct secured cl	·	
	Model: Year:	one. Debtor 1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Approximate mileage:		Greations vino riave ola	iino occarea by 1 reporty.	
	, approximate mileage.	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secure	d claims on Schedule D:	
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
		r all of your entries from Part 2, including any entries		520.00	
you ha	we attached for Part 2. Write that number h	ere	>		

Raymurase 16-20991 First Name Doc 1
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 Debtor 1 **Describe Your Personal and Household Items** Part 3: Current value of the

ро you own or n	ave any legal or equitable interest in any of the following items?	Do not deduct secured claims or exemptions.
6. Household goods Examples: Major app	s and furnishings bliances, furniture, linens, china, kitchenware	
No		
Yes. Describe	living room set, sofa, tables, bedroom set, 3 twin beds	\$650.00
7. Electronics Examples: Television	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	-
No		
Yes. Describe	computer, tablet	\$400.00
stamp, co	lue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No Yes. Describe		
	orts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments	
✓ No		
Yes. Describe		
_ ·	les, shotguns, ammunition, and related equipment	-
✓ No		
Yes. Describe		
11. Clothes Examples: Everyday No	clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	used clothing	\$300.00
12. Jewelry Examples: Everyday j	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er	
✓ No		
Yes. Describe		
13. Non-farm animal Examples: Dogs, car		-
Yes. Describe		
14. Any other person	nal and household items you did not already list, including any health aids you did not list	
✓ No		7
Yes. Describe		
	alue of all of your entries from Part 3, including any entries for pages you have attached number here▶	\$1350.00

Debtor 1 Raymur@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 @654:38 Desc Main

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Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: first financial bank \$50.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific

information about

them

Doc 1 Filed 06/28/16 Entered 06/28/16 /16/54:38 Desc Main Document Page 15 of 69 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: 401(k) or similar plan: Pension plan: Pension plan: IRA: IRA: Retirement account: Retirement account: Keogh: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	Raymurdo	ise 1	6-20991	Doc 1 Middle Name		06/28/16 cumente			6∉46√54: <u>38</u>	Desc Main
24.				tion IRA, in a , 529A(b), and		a qualifie	d ABLE progra	m, or under a	qualified sta	te tuition program.	
		No Yes	Institutio	on name and d	escription. Sep	arately file	the records of a	ny interests.11	U.S.C. § 521(c):	
25.		sts, equita rcisable fo No			s in property	(other tha	an anything list	ted in line 1),	and rights or	powers	
		Yes. Descr	ibe								
26.	Еха		net dom				intellectual proyalties and licens		nts		
27.			ding per	and other ge mits, exclusive			ssociation holdin	gs, liquor licer	nses, professio	nal licenses	
Mor	ney (or prope	rty ow	ed to you?	?						Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax	refunds ow	ed to y	ou							
		Yes. Give s _l about you al	them, in ready file	nformation cluding whethe ed the returns ars	er					Federal: State: Local:	
29.		ily support		ımp sum alimo	ny, spousal sup	oport, child	support, mainte	nance, divorce	settlement, pro	operty settlement	
		No		·					·	Alimony:	
	ш`	Yes. Give s _l	oecific ir	nformation						Maintenance:	
										Support:	
										Divorce settlement	:
										Property settlemen	t:
30.		<i>nples:</i> Unpa	id wage	one owes you es, disability ins ity benefits; unp			lity benefits, sick omeone else	pay, vacation p	oay, workers' co	mpensation,	
	_	No Yes. Descri	be								

Deb	tor 1	Raymuldase 16 First Name	6-20991	Doc 1 Middle Name	Filed 06/28/16 Documernt	<u>Entered</u> 06/28/6 Page 17 of 69	L6 @L6₩54: <u>38</u> D	esc Main
31.		rests in insurance mples: Health, disabi		rance; health		edit, homeowner's, or rente	r's insurance	
		No Yes. Name the insur of each policy and lis	. ,	- -	Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		neone who has died eeds from a life insurance p	policy, or are currently entitle	d to receive	
33.	Exar	mples: Accidents, em			have filed a lawsuit or more claims, or rights to sue	ade a demand for payme	nt	
		No Yes. Describe						
34.	to se	et off claims	unliquidated	claims of ev	ery nature, including co	unterclaims of the debtor	and rights	
		No Yes. Describe						
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list				
36.			-			es for pages you have att		\$50.00
Part	5:	Describe Any B	Susiness-Ro	elated Pro	perty You Own or Ha	ave an Interest In. Li	st any real estate i	n Part 1.
37.	Do y	ou own or have an	y legal or equ	uitable intere	st in any business-relate	d property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Acco	ounts receivable or	commissions	s you already	y earned			
		No Yes. Describe						
39.		ce equipment, furn mples: Business-rela			odems, printers, copiers, fa	x machines, rugs, telephone	es, desks, chairs, electron	ic devices
	✓	No Yes. Describe						
	_							

		Raymul@ase 16 First Name		Doc 1	Filed 06/28/16 Document	Entered 06/28/1 Page 18 of 69	.6 ∂ 1.6 00 5 4: <u>38</u> D	esc Main	
40.	Mac	hinery, fixtures, eq	uipment, sup	plies you us	se in business, and tools	of your trade			
	V	No							
		Yes. Describe							
41.	Inve	entory							
	✓	No							
		Yes. Describe							
42.	Inte	rests in partnershi	ps or joint ve	entures				•	
	✓	No							
		Yes. Give specific			Name of entity:		% of ownership:		
		information about							
		them							
								_	
43. C	Custo	omer lists, mailing	lists. or other	r compilatio	ns				
	V	_	, , , , , , ,						
	=		clude nersonal	llv identifiable	e information (as defined in 1	1 U.S.C. & 101(41A))?			
	_		5.445 po. 55.14.	,					
		∐ No							
		Yes. Descri	ibe						_
44.	Any	business-related p	roperty you o	did not alread	dy list				
	~	No							
	=	Yes. Give specific							
		information							
				•					
				;					
			-			for pages you have attach			
Part	6:	Describe Any F	arm- and (Commerci	al Fishing-Related P	roperty You Own or H	lave an Interest In		
46.	Do	you own or have a	ny legal or eg	uitable inter	rest in any farm- or comm	ercial fishing-related prop	erty?		
		No. Go to Part 7.	'		-		-	Current value of	
	Ħ	Yes. Go to line 47.						portion you own? Do not deduct secu	
								claims	iieu
								or exemptions	
47.		m animals <i>mples:</i> Livestock, pou	ıltrv. farm-raise	ed fish					
	_		, idilii-idist	JG 11011					
		No Yaa Daaasiba						1	
	Ш	Yes. Describe							

Deb	tor 1	Raymul@ase 16 First Name	6-20991	Doc 1	Filed 06/0		Entered 06 Page 19 of 6	√28√16√146;54: <u>38</u> S9	Desc	Main
48.	Cro	ps-either growing	or harvested	I	Docum	CIIL	r age 15 or c	,,		
	✓	No								
		Yes. Describe							_	
49.	Fari	m and fishing equi	pment, imple	ements, mach	inery, fixtures, a	and tools	of trade			
	✓	No								
		Yes. Describe							_	
50.	Fari	m and fishing supp	lies, chemica	als, and feed						
	✓	No								
		Yes. Describe							_	
51.	Any	farm- and comme	rcial fishing-r	related proper	rty you did not a	already lis	st			
	✓	No								
		Yes. Describe							_	
50.4					O to also the second					
			-			-	for pages you have			
									_	
Part 53.		Describe All Pro ou have other pro					nat You Did Not	List Above		
55.		mples: Season tickets			iot aiready list:					
	✓	No								
		Yes. Give specific								
		information								
										<u></u>
54. A	dd th	e dollar value of al	l of your entr	ies from Part	7. Write that nu	ımber hei	re			
Part	8:	List the Totals	of Each Pa	rt of this F	orm					1
55. F	Part 1	: Total real estate,	line 2					>		
56. p	oart 2	total vehicles, line	5			\$1620.00)			
57. P	art 3	: Total personal an	d household	items, line 1	5	\$1350.00				
58. P	art 4	: Total financial ass	ets, line 36			\$50.00	<u>'</u>			
59. F	Part 5	: Total business-re	elated proper	ty, line 45		φου.ου				
60. F	Part 6	: Total farm- and fi	shing-relate	d property, lir	ne 52					
61. F	Part 7	: Total other prope	erty not listed	I, line 54						
62. 7	Total	personal property.	Add lines 56 t	hrough 61		\$3020.00				+ \$3020.00
						φου20.00	·	Copy personal property to	otal >	. 40020.00
62.4	otel :	of all proporty on S	obodulo A/D	Add line FF :	lino 62					\$3020.00

		- 4 =" Loo	VIO. 14.0	
Fill in this info	Case 16-20991 ormation to identify your case:	Doc 1 Filed 06	3/28/16	54:38 Desc Main
Debtor 1	Raymundo		Arebalo	
200.0.	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fil	ing) First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the: N	orthern	District of Illinois	
	<u></u>		(State)	
Case numbe	r			
(II KIIOWII)				Check if this is ar
Official	Form 106C			amended filing
			_ ,	-
<u>Schedu</u>	ule C: The Prope	erty You Clain	n as Exempt	12/1
-	-	•	eople are filing together, both are equall	
			3: Property (Official Form 106A/B) as yo	
			ch to this page as many copies of Part	2: Additional Page as necessary. On
the top of a	ny additional pages, write	your name and case	number (if known).	
exempted receive ce exemption property is	up to the amount of any rtain benefits, and tax-e of 100% of fair market vertical to exceed to the state of t	applicable statutory xempt retirement ful value under a law tha hat amount, your ex	ively, you may claim the full fair mar y limit. Some exemptions—such as to nds—may be unlimited in dollar amo at limits the exemption to a particula emption would be limited to the app	those for health aids, rights to bunt. However, if you claim an r dollar amount and the value of the
Part 1: Ide	entify the Property You C	laim as Exempt		
1. Which	set of exemptions are you cla	iming? Check one only, ev	en if your spouse is filing with you.	
You	u are claiming state and federal n	onbankruptcy exemptions. 1	1 U.S.C. § 522(b)(3)	
✓ You	u are claiming federal exemptions	s. 11 U.S.C. § 522(b)(2)		
2. For any	property you list on Schedule	e A/B that you claim as ex	empt, fill in the information below.	
Brief de	escription of the property and	Current value of	Amount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B that lists this	the portion you	Check only one box for each exemption.	
proper	ту	own	Check chily che sex for each exemplion.	
		Copy the value from Schedule A/B		
		Scriedule AVD		
Brief			_	11 U.S.C. § 522(d)(3); 11 U.S.C. §
descript	tion: used clothing	\$300.00	\$300.00	522(d)(5); C.C.P. § 703.140(b)(5); 11
Line from			100% of fair market value, up to any	U.S.C. § 522(d)(5)
Schedu	le A/B:11		applicable statutory limit	

☐ No ☐ Yes

Brief

description:

Schedule A/B:

Line from

living room set, sofa,

tables, bedroom set, 3

3. Are you claiming a homestead exemption of more than \$160,375?

twin beds

06

\$650.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

✓

\$650.00

100% of fair market value, up to any

applicable statutory limit

11 U.S.C. § 522(d)(3); 11 U.S.C. §

522(d)(5); C.C.P. § 703.140(b)(5); 11

U.S.C. § 522(d)(5)

Debtor 1 Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (166:54:38 Desc Main

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Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 11 U.S.C. § 522(d)(3); 11 U.S.C. § \$400.00 **V** computer, tablet 522(d)(5); C.C.P. § 703.140(b)(5); 11 description: \$400.00 U.S.C. § 522(d)(5) Line from 100% of fair market value, up to any Schedule A/B: 07 applicable statutory limit 11 U.S.C. § 522(d)(3); 11 U.S.C. § Brief \$50.00 \checkmark first financial bank 522(d)(5); C.C.P. § 703.140(b)(5); 11 description: \$50.00 U.S.C. § 522(d)(5) Line from 100% of fair market value, up to any Schedule A/B: 17 applicable statutory limit

		Case 16-20991	Doc 1 Filed	06/20/16 F	atarad 06/20/	16 16:54:38	Dogo Main	
Fill i	in this informa	ation to identify your case:	Doc Filen	J0//8/10 F	<u> </u>	10 10.54.38	Desc Main	
Deb	otor 1	Raymundo First Name	Middle Name	Arebalo Last Name				
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name				
Unit	ted States Ba	nkruptcy Court for the: N	orthern	District of Illinois (State)				
	se number nown)							
Of	ficial F	orm 106D						eck if this is a ended filing
Sc	hedu	le D: Creditoi	rs Who Hav	ve Claims	Secured	by Prope	rty	12/1
forn 1.	Do any cre No. Ch	nation. If more space top of any additional ditors have claims secured leck this box and submit this full in all of the information belo	pages, write your by your property? orm to the court with you	name and case	number (if kno	own).	es, and attach it t	o this
2.	List all secu	ured claims. If a creditor has the than one creditor has a part the claims in alphabetical or	rticular claim, list the oth	er creditors in Part 2.	As much as	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Southfield City Who owes Debtor	Street Michigan 48037 State ZIP Code the debt? Check one. 1 only	car loan) Statutory lien (suc	e, the claim is: Chec at all that apply. If made (such as morth	ck all that apply.	\$6,563.00	\$1,620.00	\$4,943.00
	commu	if this claim relates to a unity debt was incurred 4/1/2014	Judgment lien from Other (including a	right to offset)	8706			
		Add the dollar value of you nere:	ır entries in Column A	on this page. Write	e that number	\$6,563.00		

	Case 16-20991	Doc 1	Filed 06/28	/16 Entered	<u>06/2</u> 8/16 16:54:38	Desc	Main	
Fill in this inform	nation to identify your case:							
Debtor 1	Raymundo First Name	Middle	e Name	Arebalo Last Name				
Debtor 2				Lastivame				
(Spouse, if filing	First Name	Middle	Name	Last Name				
United States Ba	ankruptcy Court for the:	Northern	Distr	ct of <u>Illinois</u> (State)				
Case number (If known)				(State)				
Official Fo	orm 106E/F					Ched	ck if this is ar	n amended filing
Schedu	le E/F: Cred	litors V	Vho Have	e Unsecui	red Claims			12/15
party to any exe 106A/B) and on are listed in Sch the boxes on th	cutory contracts or unexp Schedule G: Executory Condule D: Creditors Who I	pired leases th Contracts and (Hold Claims S ation Page to	at could result in a Unexpired Leases ecured by Proper this page. On the	n claim. Also list exec (Official Form 106G) fy. If more space is no	Part 2 for creditors with NO outory contracts on <i>Schedu</i> . Do not include any credito eeded, copy the Part you no pages, write your name an	le A/B: Prop rs with parti eed, fill it out	erty (Officia ally secured , number th	al Form d claims that ne entries in
	editors have priority unse							
No. G Yes. List all of identify whoossible, list Part 1. If m	o to Part 2. your priority unsecured c at type of claim it is. If a clair	laims. If a credin has both prior order according a particular cla	itor has more than c ity and nonpriority a g to the creditor's na im, list the other cre	mounts, list that claim h me. If you have more t ditors in Part 3.	claim, list the creditor separate here and show both priority and than two priority unsecured cla elet.)	d nonpriority a	amounts. As	much as
	,				,	Total claim	Priority amount	Nonpriority amount
	PPORT EN/IL ditor's Name ND AV EAST Street		•	its of account number the debt incurred?	ern/a	\$0.00	\$0.00	\$0.00
Springfield City Who incur Debtor Debtor Debtor At least	Illinois State rred the debt? Check one. 1 only	ther	Contin Unliqu Disput Type of PF Domes Taxes: Claims intoxica	gent idated ed RIORITY unsecured c stic support obligations and certain other debts of or death or personal in	you owe the government			
2.2 Hogue, Erir			Last 4 dig	its of account number	er	\$0.00	\$0.00	\$0.00
688 Regent			When was	the debt incurred?	n/a			
Debtor Debtor Debtor At leass Check	State rred the debt? Check one. 1 only	ther	Contin Unliqu Disput Type of PF Domes Taxes: Claims intoxica	gent idated ed RIORITY unsecured c stic support obligations and certain other debts of or death or personal i	you owe the government			

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Part 1: Your PRIORITY Unsecured Claims - Cont	inuation Page			
After listing any entries on this page, number them be	ginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name PO Box 19405 Number Street Springfield Illinois 62794 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No	Last 4 digits of account number When was the debt incurred?	\$0.00	\$0.00	\$0.00
Yes				

Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 /16/54:38 Desc Main Debtor 1 Document Page 25 of 69 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Advance America \$600.00 Last 4 digits of account number Nonpriority Creditor's Name 1500 S Lake St When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60060 Illinois Mundelein City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify payday loan Is the claim subject to offset? **V** No Yes 4.2 CITI \$2,101.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6241 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent South Dakota 57117 SIOUX FALLS Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? I✓I No Yes 4.3 Community Care Network Inc \$205.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1297 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bedford Park Illinois 60499 City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify medical debt Is the claim subject to offset? ✓ No Yes

Part 2: RaymunGase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (1.6:54:38 Desc Main Page 26 of 69

	After listing any entries on this page, number them beginning v	vith 4.5, followed by 4.6, and so forth.	Total claim
4.4	EOS CCA	— Local A digita of account number 7070	\$528.00
	Nonpriority Creditor's Name PO BOX 981008	Last 4 digits of account number 7273	<u> </u>
	Number Street	When was the debt incurred? 8/1/2012	
		As of the date you file, the claim is: Check all that apply.	
	BOSTON Maine 02298	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for ORIGINAL	
	✓ No	Other. Specify CREDITOR: AT T MOBILITY	
	Yes		
4.5	Fountain View Apartments	Last 4 digits of account number	\$3,360.00
	Nonpriority Creditor's Name 9614 Granada Ct Apt#119	<u>———</u>	<u> </u>
	Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Crown Point Indiana 46307	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	✓ Other. Specify bank rent arrearage	
	Is the claim subject to offset?	<u> </u>	
	✓ No		
	Yes		
4.6	Franciscan Alliance, Inc.	Last 4 digits of account number	\$2,391.05
	Nonpriority Creditor's Name 28044 Network Place	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Chicago Illinois 60673		
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify medical debt	
	✓ No		
	Yes		

Part 2: Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (1/6):54:38 Desc Main

Part 2: Pour NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim			
4.7	Lake Surgical Associates LLC	Last 4 digits of account number	\$2,350.00			
	Nonpriority Creditor's Name 10110 Donald Powers Dr Suite 202	When was the debt incurred?				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
		Contingent				
	MunsterIndiana46321CityStateZip Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim relates to a community debt	✓ Other. Specify medical debt				
	Is the claim subject to offset?					
	✓ No					
	Yes					
4.8	LVNV FUNDING LLC	Last 4 digits of account number 0711	\$736.00			
	Nonpriority Creditor's Name PO BOX 740281	When was the debt incurred? 5/1/2015				
	Number Street					
		As of the date you file, the claim is: Check all that apply. Contingent				
	HOUSTON Texas 77274					
	City State Zip Code Who incurred the debt? Check one.	Unliquidated				
	Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify 001 UnknownLoanType				
	✓ No					
	Yes					
4.9	Mira Med Revenue Group	Look 4 digito of account number	\$240.00			
	Nonpriority Creditor's Name Dept 77304 PO Box 77000	Last 4 digits of account number				
	Number Street	When was the debt incurred?n/a				
		As of the date you file, the claim is: Check all that apply.				
	Detroit Michigan 48277	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that				
	블	you did not report as priority claims				
	Check if this claim relates to a community debt Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify medical debt				
	No	Thedical debt				
	Yes					
	·~~					

Debtor 1 RaymunGase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (1/6):54:38 Desc Main

rst Name Document Page 28 of 69

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 \$163.30 Last 4 digits of account number Nonpriority Creditor's Name 801 E 86th Ave When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Merrillville Indiana 46410 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify utility Is the claim subject to offset? **✓** No Yes 4.11 Prairie Point Apartments \$12,500.00 Last 4 digits of account number Nonpriority Creditor's Name 9123 Cleveland St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Indiana 46410 Merrillville City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _____ broken lease-rent Is the claim subject to offset? **✓** No Yes 4.12 St Margaret- Mercy Hospital \$14,912.60 Last 4 digits of account number Nonpriority Creditor's Name 24 Joliet Dr When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Dyer Indiana 46311 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify judgment

✓ No Yes

Is the claim subject to offset?

Debtor 1 Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (1/6):54:38 Desc Main

First Name Document Name Page 29 of 69

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 WFDS \$1,808.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 19657 When was the debt incurred? 3/1/2007 Street Number As of the date you file, the claim is: Check all that apply. Contingent **IRVINE** California Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify 066 Automobile Is the claim subject to offset? **✓** No

Yes

Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 (166:54:38 Desc Main First Name Document Place Page 30 of 69

List Others to Be Notified About a Debt That You Already Listed Debtor 1 Raymul@ase 16-20991 First Name

Stenger & Stenger			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
2618 East Paris Ave	e SE		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Grand Rapids	Michigan	49546	Last 4 digits of account number 0711
City	State	Zip Code	
TMobile			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 742596			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati	Ohio	45274	Last 4 digits of account number 7273
City	State	Zip Code	
BLEECKER BROD Name	EY&ANDREWS		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			· _ ·
9247 N MERIDIAN	#101		Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Indianapolis	Indiana	46260	Last 4 digits of account number
City	State	Zip Code	
St Anthony Hospital			On addition of the Board on Board O. P. Loron Park the contributions 11: 0
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
301 W Homer St			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Michigan City	Indiana	46360	Last 4 digits of account number
	State	Zin Code	

Debtor 1 Raymul@ase 16-20991 First Name Doc 1

Part 4: Add th	le Amounts for Each Type of Unsecured Claim	ge 31 01 09
	nounts of certain types of unsecured claims. This information is for ounts for each type of unsecured claim.	r statistical reporting purposes only. 28 U.S.C. §159.
		Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a . \$0.00
nom rait i	6b. Taxes and certain other debts you owe the government	6b. \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$0.00
	6e. Total. Add lines 6a through 6d.	6e . \$0.00
		Total claims
Total claims from Part 2	6f. Student loans	6f . \$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$41,894.95
	6j. Total. Add lines 6f through 6i.	6j. \$41,894.95

	Case 16-2099	1 Doc 1 Filed 0	6/28/16 Entered	06/20/16 16·5 <i>1</i> ·20	Desc Main
Fill in this information	ation to identify your case			00/20/10 10.34.36	Desc Main
Debtor 1	Raymundo		Arebalo	_	
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)	_	
Case number (If known)				_	
Official F	Form 106G				Check if this is a amended filing
Schedul	e G: Execut	ory Contracts	and Unexpired	Leases	12/1
	, copy the additional p				ng correct information. If more onal pages, write your name and
1. Do you ha	ive any executory	contracts or unexpired	l leases?		
✓ No. Ched	ck this box and file this for	m with the court with your othe	r schedules. You have nothing	else to report on this form.	
Yes. Fill i	n all of the information be	elow even if the contracts or lea	ases are listed on <i>Schedule A/</i>	B: Property (Official Form 106A)	/B).
				tate what each contract or lea mples of executory contracts and	
Person	or company with whor	n you have the contract or le	ease	State what the contract	or lease is for

		Case 16-2099	1 Doc 1 Filed 0	16/28/16 Entered	06/28/16 16:54:38	Desc Main
Fill	in this inform	ation to identify your case		U. C.	0/10 10.54.50	Desc Main
De	btor 1	Raymundo		Arebalo		
Do	btor 2	First Name	Middle Name	Last Name		
	ouse, if filing	First Name	Middle Name	Last Name	_	
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois	_	
	se number			(State)	_	
						Check if this is a amended filing
\bigcirc 1	fficial F	orm 106H				amended illing
		e H: Your Co	debtors			12/1:
				you may have. Be as complete	to and accurate as nessible.	If two married people are filing
in th	•			-		e, fill it out, and number the entries ase number (if known). Answer
1.	Do you have No	e any codebtors? (If yo	u are filing a joint case, do no	t list either spouse as a codebto	or.)	
2.	Louisiana, N		ived in a community proper erto Rico, Texas, Washington,	· · ·	unity property states and territon	ies include Arizona, California, Idaho,
		id your spouse, former sp	ouse, or legal equivalent live v	with you at the time?		
			tate or territory did you live? _	Fill in the	name and current address of th	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	-	
		Number Street			-	
		City	State	Zip Code	-	
3.	as a codeb	tor only if that person is	s a guarantor or cosigner. I	Make sure you have listed the		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in t	his information to identify	/ volit case.	100110		8/16 16:	:54:38	Desc N	√ain	
	ins information to identify	Docum	none i c	age on or	05				
Debtor 1			Arebalo		_				
	First Name	Middle Name	Last Name	е		Check if this	s is:		
Debtor 2 (Spouse.	if filing) First Name	Middle Name	Last Name		-	An ame	nded filing		
		Middle Name	Lastinaiii	6		=	ŭ	ina nost	t-petition chapter 13
United S	tates Bankruptcy Court for the:	Northern	District of Illinoi		_		es as of the		
Case nu	mher		(State	e)					
(If known)					_	MM / D	D/YYYY	_	
Offici	ial Form 106I								
	edule I: Your Inc	come							12/15
espon	sible for supplying cor	as possible. If two marrie rect information. If you a ir spouse. If you are sep	are married	and not fil	ing jointly, ar	nd your s	pouse is	living	g with you,
nforma	ntion about your spouse	e. If more space is neede	d, attach a	separate s					
ages,	write your name and ca	se number (if known). A	nswer every	question.					
Dort 4	December Franciscome	4							
Part 1	Describe Employme	ent							
1	. Fill in your employment		Debtor 1			Debtor 2	:		
	information.	Employment status	Employed			Emplo	rod.		
	If you have more than one		✓ Employed				•		
	job,		Not Emplo	yea		☐ Not Er	nployed		
	attach a separate page with information about additional	Occupation	Quality Engine	eer					
	employers.	Employer's name	Donson Mach	ine Co					
	Include part time, seasonal,	Employer's address	12416 S Kedva	ale Ave					
	or self-employed work.	Employer o dudi ess	Number Street	alo 7 WC		Number Str	et		
	Seil-employed work.								
	Occupation may include								
	student or homemaker, if it applies.								
	, , , , , , , , , , , , , , , , , , , ,		Alsip City	Illinois State	Zip Code	City		State	Zip Code
				State	Zip Code	·			·
		How long employed there?	5 years					_	
Part 2	Give Details About I	Monthly Income							
		date you file this form. If you ha	ave nothing to re	port for any line	e, write \$0 in the s	pace. Includ	e your non-f	iling spo	ouse unless you
are sep									
-	r your non-filing spouse have mo ate sheet to this form.	ore than one employer, combine th	ie information for	r all employers	for that person on	the lines be	ow. If you n	eed mor	e space, attach
и обран	ate officer to this form.			For	Debtor 1	For Debt	or 2 or		
				FOI	Dentor 1	non-filing	g spouse		
		ry, and commissions (before all		2	\$4,219.58				
		lculate what the monthly wage wo		•	. 40.00				
3. Es	stimate and list monthly overt	time pay.		3.	+ \$0.00				

4. Calculate gross income. Add line 2 + line 3.

\$4,219.58

Debtor 1 Raymundase 16-20991 Filed 06/28/16 Entered @6.28/16.54:38 Desc Main Doc 1 Middle Name Documentame Page 35 of 69 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$4,219.58 5. List all payroll deductions: \$742.60 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$299.87 5f. Domestic support obligations 5f. \$489.88 5q. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$1,532.35 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,687.23 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10.Calculate monthly income. Add line 7 + line 9. 10. \$2,687.23 \$2,687.23 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,687.23 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

	Case 16-20	<u> 1991 Doc 1 Filed (</u>	<u> 16/28/16 Entered 06/2</u> 8	/16 16:54:38	Desc Main	
Fill in this info	ormation to identify you			, = 0 = 0.000	2 000	
Debtor 1	Raymundo		Arebalo			
	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if fill	First Name	Middle Name	Last Name	An amended filin	ıg	
United States	Bankruptcy Court for t	he: Northern	District of Illinois (State)		nowing post-petition chapte he following date:	er 13
Case number (If known)	r			MM / DD / YYY	<u></u>	
Official	Form 106	ı				
	ıle J: Your	_				12/4
		•	re filing together, both are equally re	sponsible for supplyir	na correct	12/1
nformation. I		led, attach another sheet to this	form. On the top of any additional p			
	scribe Your Hous					
1. Is this a jo		**				
✓ No. G	Go to line 2					
Yes. I	Does Debtor 2 live in	a separate household?				
	No					
	Yes. Debtor 2 mu	st file Official Forms 106J-2, Exper	nses for Separate Household of Debtor 2	2.		
2. Do you h a	ave dependents?	No				
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent liv with you?	е
			Child	14 years	No.	
			Child	12 years	✓ Yes. No.	
			Crinic	IZ years	✓ Yes.	
•	expenses include sof people other	✓ No				
than	Г	Yes				
yourself a depender						
Part 2: Est	timate Your Ongo	ing Monthly Expenses				
-	s of a date after the b		you are using this form as a supple oplemental Schedule J, check the bo	•	-	
•	•	on-cash government assistance led it on Schedule I: Your Incom	•		Your expe	enses
	al or home ownership for the ground or lot. 4.	-	nclude first mortgage payments and		4.	\$800.00
•	cluded in line 4:				 .	
	estate taxes				4a	\$0.00
4b. Prop	erty, homeowner's, or r	renter's insurance			4b.	\$0.00
	e maintenance, repair, a				40. 4c.	\$0.00
					TU.	Ψυ.υυ

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Raymul@ase 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 /16/54:38 Desc Main

Document Page 37 of 69 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$175.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$660.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$90.00 9. 10. Personal care products and services \$80.00 10. 11. Medical and dental expenses \$22.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$400.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$111.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$344.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	RaymulGase 16-2		Filed 06/28/116	Entered 06/28/16 /16:54:3	88 D	esc Main	
	First Name	Middle Name	Documetht ^{me}	Page 38 of 69			
21.Other.	Specify:				21		\$0.00
22. Calcu	late your monthly exp	enses.					\$2,682.00
22a. A	dd lines 4 through 21.						\$0.00
22b. C	opy line 22 (monthly ex	penses for Debtor 2), if an	y, from Official Form 106J-	-2			\$2,682.00
22c. A	dd line 22a and 22b. Th	e result is your monthly ex	penses.		22.		
23.Calcu	ate your monthly net	income.					
23a. C	opy line 12 (your combi	ned monthly income) from	Schedule I.		23a	_	\$2,687.23
23b. C	opy your monthly expen	ses from line 22 above.			23b	_	\$2,682.00
	, , ,	penses from your monthly	income.				\$5.23
-	The result is your month	ly net income.			23c		
24. Do yo	ou expect an increase	or decrease in your exp	enses within the year aft	er you file this form?			
For e	xample, do vou expect t	o finish paving for your ca	r loan within the year or do	vou expect vour			
		. , , ,	f a modification to the term				
П١	lo						
▽	´es						
. نکر	Explain here:						
	'	Ifriend. She pays utilities.					
	Lives with gir	iniona. One payo dimileo.					
	-						

		Case 16-2099	1 Doc 1 Filed 0	6/29/16 Ento	red 06/28/16 16:54:38	Doce Main
Fill ir	n this inform	nation to identify your cas		728/10 Fille	TEIL U0/20/10 10.54.50	Desc Main
Debt	tor 1	Raymundo		Arebalo		
		First Name	Middle Name	Last Name		
Debt (Spo		First Name	Middle Name	Last Name		
Unite	ed States B	ankruptcy Court for the:	Northern	District of Illinois		
0				(State)		
(If kn	e number own)	-				
Off	ficial F	Form 106De	e <u>C</u>			Check if this is a amended filing
De	clarat	ion About a	n Individual De	btor's Sche	dules	12/1
f two	married p	eople are filing togethe	er, both are equally responsi	ble for supplying corr	ect information.	
Part	and 3571. 1: Sign Did you pa		eone who is NOT an attorney	to help you fill out ba	nkruptcy forms?	
	✓ No					
	Yes. N	Name of person		Attach Bankrup Signature (Offic	tcy Petition Preparer's Notice, Decla ial Form 119).	ration, and
*	that they a	are true and correct. undo Arebalo of Debtor 1	e that I have read the summa	x	ature of Debtor 2	
		DD/YYYY		Date	MM/DD/YYYY	

Eill i	n this inform	Case 16		Doc 1	Filed	06/28/16	Entered 0	6/2 <mark>8/16 16:</mark>	54:38	Desc N	Main
	otor 1	Raymundo	y your case.			Areba	lo				
Dob	otor 2	First Name		Middle	Name	Last N	lame	_			
		First Name		Middle	Name	Last N	lame	-			
Unit	ed States B	ankruptcy Cou	rt for the:	Northern		District of III	inois State)	_			
	e number nown)					(6	siale)	_			
∩f	ficial F	Form 1	07					I			Check if this is a amended filing
				I Affairs	for	Individu	als Filino	g for Ban	krupte	CV	12/1
Be as	s complete	and accurate	as possible	. If two married	people	are filing togeth	er, both are equ	ally responsible	for supplyi	ing correct	information. If more
spac	e is needed	l, attach a se	parate sheet	o this form. Or	the top	of any addition	al pages, write y	our name and ca	ise numbei	r (if known).	Answer every question
Part	Give	Details Ab	out Your M	arital Status	s and V	Vhere You Li	ved Before				
1.	What is	your current	marital statu	s?							
	☐ Mar	ried married									
2.	During t	he last 3 year	s, have you li	ved anywhere	other tha	an where you liv	e now?				
	☐ No Yes.	List all of the r	olaces vou live	d in the last 3 ve	ars. Do n	ot include where	vou live now.				
	<u></u>		, , , , , , , , , , , , , , , , , , , ,				,				
	Deb	tor 1:			Date: there	Debtor 1 lived	Debtor 2:				ates Debtor 2 lived ere
							Same a	s Debtor 1			Same as Debtor 1
		Granda Cour	t		- From	2/1/2014	Ni wakan O			Fr	om
	Nurr	ber Street			_ To	5/1/2016	Number St	reet		To	, <u> </u>
	Crov	vn Point	Indiana	46307	_						
	City		State	Zip Code	_		City	State	Zip Co	ode	-
							Same a	s Debtor 1		L	Same as Debtor 1
	Num	ber Street			From		Number St	reet		—— Fr	om
					_ To					To	
	City		State	Zip Code	_		City	State	Zip Co	ode	
				•			•				
		•	-	•		• .		Vashington, and V	• ,	Community	property states and
	✓ No										
	Yes. M	ake sure you f	ill out Schedul	e H: Your Codel	otors (Off	icial Form 106H)).				

Debtor 1 Raymul@ase 16-20991 First Name <u>Filed 06/28/16</u> <u>Entered 06/28/16 /1.6:54:38 Desc Main</u> Documenter Doc 1

Part 2: Explain the Sources of Your Income

4.	Did you have any income from employment Fill in the total amount of income you received f activities. If you are filing a joint case and you ha	rom all jobs and all businesses	including part-time		
	No ✓ Yes. Fill in the details.		·		
	_	Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$24000.00	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31, 2015) YYYY	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$46000.00	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$45000.00	Wages, commissions, bonuses, tips Operating a business	
	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details.	e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				
	For last calendar year: (January 1 to December 31,				
	For the calendar year before that: (January 1 to December 31,				

Debtor 1 Raymul@ase 16-20991 First Name Filed 06/28/16 Entered 06/28/16 11:6:54:38 Desc Main Doc 1

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Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Are eith	er Debtor 1's o	r Debtor 2's o	debts primarily con	sumer debts?			
✓ No.			or 2 has primarily c sehold purpose."	onsumer debts. Cons	sumer debts are defined in '	11 U.S.C. § 101(8) as "incurr	ed by an individual primarily
	During the 90 o	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$6,425* or more	?	
	✓ No. Go to	line 7.					
	tota	l amount you բ	paid that creditor. Do	not include payments for	more in one or more payme or domestic support obligati attorney for this bankruptcy	ons, such as	
	* Subject to adj	ustment on 4/	01/19 and every 3 yea	ars after that for cases f	iled on or after the date of a	djustment.	
Yes.	. Debtor 1 or D	ebtor 2 or bo	oth have primarily c	onsumer debts.			
	During the 90 c	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$600 or more?		
	No. Go to		1 2,	, , , ,			
	Yes. List	below each cr creditor. Do n	ot include payments		ore and the total amount you oligations, such as child sup ankruptcy case.		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	editor's Name umber Street				-	_	Mortgage Car Credit card
							Loan repayment Suppliers or
Cit	ty	State	Zip Code				vendors Other
Cr	editor's Name						Mortgage
Nu	ımber Street						Credit card Loan repayment
Cit	ty	State	Zip Code				Suppliers or vendors Other
_					_		- Mortgage
Cr	editor's Name						Car
Nu	ımber Street						Credit card
							Loan repayment
Cit	hv.	State	Zip Code				Suppliers or vendors
Cit	· y	State	Zip Code				Other

Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main Debtor 1 Raymur Gase Document Page 43 of 69 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

		filed for bankruptcy, wing personal injury cases						tody mo	difications, and contract
disput							-	-	
	lo								
✓ Y	es. Fill in the details.								
			Nature o	of the case	Court or agend	су		Statu	s of the case
	Case title	v. Raymundo Arebalo	Contract		Lake County Ci	rcuit Court		✓ P	ending
	LVIVV Fulldling LLC	v. Raymundo Arebaio			Court Name				On appeal
	Case number				Number Street				Concluded
								_	
					City	State	Zip Code		
	Case title	Hoopital v Baymunda	Contract		Hammond City	Court		✓ P	ending
	-	Hospital v Raymundo balo			Court Name				On appeal
					5925 Calumet A Number Street	ve		c	Concluded
	Case number				Hammond	Indiana	46320	_	
					City	State	Zip Code		
✓	Yes. Fill in the inform	ation below.		Describe the prope	rty		Date		Value of the property
	St Margaret- Mercy	Hospital		check garnished			3/2/2016		\$0
	Creditor's Name			F					
	24 Joliet Dr			Explain what happe	nea				
	Number Street			_					
				Property was rep					
				Property was fore					
	Dyer	Indiana 4631		Property was atta	rnisnea. ached, seized, or lev	/ied			
	City	State Zip C	ode	Describe the prope		nou.	Date		Value of the property
	Creditor's Name								
				Explain what happe	ned				
	Number Street								
				Property was rep	ossessed.				
				Property was fore					
				Property was gai					
	City	State Zip C	ode		ached, seized, or lev	ried.			

Deb	tor 1	Raymul@ase 16-20991 Doo First Name Middle Na			<u>ntered</u>	38 Desc	Main
11.		nin 90 days before you filed for bankru ounts or refuse to make a payment beca No		creditor, including a l		f any amounts fr	om your
		Yes. Fill in the details.					
	_			Describe the action	the creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of accour	nt number: XXXX-		
		City State Zi	p Code				
12	\A/;4L			f vour proporty in the	naccaccion of an accionac for the	honofit of oradi	toro a court appointed
12.		in 1 year before you filed for bankrupt iver, a custodian, or another official?	cy, was ally o	i your property in the	possession of an assignee for the	s benefit of credi	iors, a court-appointed
		No Yes					
Part	5:	List Certain Gifts and Contribu	tions				
13.	Wit	thin 2 years before you filed for bankru	ptcy, did you	give any gifts with a	total value of more than \$600 per p	erson?	
	✓	No					
	Ш	Yes. Fill in the details for each gift.				_	
		Gifts with a total value of more than \$ per person	6600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		B 1 1 2 1 2 4	p Code				
		Person's relationship to you					
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zi	p Code				
		Person's relationship to you					

		First Name	IM	dale Name Do	ocumente Page 46 of 69		
14.	With	nin 2 years before yo	ou filed for ba		give any gifts or contributions with a total value of mor	re than \$600 to an	y charity?
	✓	No Yes. Fill in the details	for each gift o	r contribution.			
		Gifts with a total va			Describe the gifts	Dates you gave the gifts	Value
		Charity's Name					
		Number Street			•		
		City	State	Zip Code			
Part		List Certain Loss					
15.		iin 1 year before you bling?	filed for bank	cruptcy or since y	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
		No You Fill in the details					
	Ц	Yes. Fill in the details. Describe the proper	rty you lost a	nd	Describe any insurance coverage for the loss	Date of your	Value of property lost
		how the loss occur	rea		Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	loss	
Part	7 :	List Certain Payr	nents or Tr	ansfers			
16.					r anyone else acting on your behalf pay or transfer any	property to anyor	ne you consulted about
		ting bankruptcy or po de any attorneys, bank			t counseling agencies for services required in your bankrupton	су.	
		No Yes. Fill in the details.					
					Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 0.00	6/28/2016	\$0.00
		Person Who Was Pai	id				·
		20 South Clark Street	t 28th Floor				
		Number Street					
		Chicago	Illinois	60606			
		City	State	Zip Code			
		Email or website add None					
		Person Who Made the	e Payment, if N	lot You			
		Person Who Was Pai	id				
		Number Street					
		City	State	Zip Code			
		Email or website add	ress				
		Person Who Made the	e Payment, if N	lot You			

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7.				ocument Page 47 of 69	j			
	you	nin 1 year before you filed for ba deal with your creditors or to ma not include any payment or transfer	ake payments to you		y or transfer any	oroperty to anyor	ne who p	romised to he
	V	No						
	씕							
	Ц	Yes. Fill in the details.		Description and value of any proper	ty transferred	Date payment or transfer	Amoun	t of payment
						was made		
		Person Who Was Paid						
		Number Street		-				
		City State	Zip Code					
	_	sfers that you have already listed on No Yes. Fill in the details.		Description and value of any		property or paym		Date transfe
				property transferred		ebts paid in exch		was made
		Person Who Received Transfer						
		Number Street						
		City State Person's relationship to you	Zip Code					
		,	Zip Code					
		Person's relationship to you	Zip Code					
		Person's relationship to you Person Who Received Transfer	Zip Code					
		Person's relationship to you Person Who Received Transfer	Zip Code Zip Code					
		Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for	Zip Code bankruptcy, did you	transfer any property to a self-settled	trust or similar de	evice of which yo	u are a b	eneficiary?
	(The	Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for use are often called asset-protection	Zip Code bankruptcy, did you	transfer any property to a self-settled	trust or similar de	evice of which yo	u are a b	eneficiary?
	(The	Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for	Zip Code bankruptcy, did you	transfer any property to a self-settled	trust or similar de	evice of which yo	u are a b	eneficiary?
	(The	Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for use are often called asset-protection.	Zip Code bankruptcy, did you	transfer any property to a self-settled Description and value of the proper		evice of which yo	u are a b	·
-	(The	Person's relationship to you Person Who Received Transfer Number Street City State Person's relationship to you nin 10 years before you filed for use are often called asset-protection.	Zip Code bankruptcy, did you			evice of which yo	u are a b	Date transfe

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List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Date account Last 4 digits of account Type of account or Last balance number instrument was closed, before closing sold, moved, or transfer or transferred First Financial XXXX-0000 Checking 3/10/2016 \$0.00 Person Who Was Paid Savings 3220 Russell Street Money market Number Street Brokerage Other San Diego California 92106 City State Zip Code XXXX-Checking Person Who Was Paid Savings Money market Number Street Brokerage Other City State Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? Name of Financial Institution Name Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? Name of Storage Facility Name Number Street Number Street

City

State

State

Zip Code

City

Zip Code

Deb		Raymul@ase 16-20991 Doc 1 First Name Middle Name	Filed 06/ Docum	ëtht ^{me} Paq	ntered 06/2 ge 49 of 69	?8 /1⊾6 ⁄1⊾6;54: <u>38 Desc Mai</u>)	n
Part	9:	Identify Property You Hold or Contro	ol for Some	one Else			
23.	Do y	ou hold or control any property that someor	e else owns?	Include any pro	perty you borro	owed from, are storing for, or hold in tru	ist for someone.
		No Yes. Fill in the details.					
	ш	Too. I ill ill till dotallo.	Where is t	he property?		Describe the contents	Value
		Owner's Name	Number St	root		_	
		Owners Name		ieet			
		Number Street				_	
			City	State	Zip Code	_	
		City State Zip Code	<u> </u>				
Par	10:	Give Details About Environmental I	nformation				
		urpose of Part 10, the following definitions apply:					
. 0.		nvironmental law means any federal, state, or loca	al statute or req	ulation concernir	na pollution, conta	mination, releases of	
	ha	azardous or toxic substances, wastes, or material	into the air, land	d, soil, surface wa	ater, groundwater		
		cluding statutes or regulations controlling the clea	•				
		ite means any location, facility, or property as defin used to own, operate, or utilize it, including dispo		nvironmental law	, whether you now	own, operate, or utilize it	
	■ H	azardous material means anything an environmer	ital law defines a	as a hazardous v	vaste, hazardous	substance,	
	to	xic substance, hazardous material, pollutant, conf	taminant, or sim	ilar term.			
Rep	ort al	I notices, releases, and proceedings that you know	w about, regardl	ess of when they	occurred.		
24.	Has	any governmental unit notified you that you	may be liable	or potentially li	able under or in	violation of an environmental law?	
	~	No					
		Yes. Fill in the details.					
			Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmen	tal unit		_	
		Number Street	Number St	reet		_	
						_	
			City	State	Zip Code		
		City State Zip Code					
25.	Have	e you notified any governmental unit of any r	elease of haza	rdous material	?		
	✓	No					
		Yes. Fill in the details.					
			Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmen	tal unit		-	
		Number Street	Number St	reet		-	
		Number Street	Number Sti	reet	Zip Code	- -	
		Number Street City State Zip Code			Zip Code	- -	

Debto	or 1	Raymul@ase 16-20991 First Name		iled 06/28/16 Document	<u>Entered</u> 06/28 Page 50 of 69	14166646664138	Desc Main
26. I	Hav	e you been a party in any judi	cial or administrativ	e proceeding under	any environmental law	? Include settlements	and orders.
	✓	No					
	_	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
		Casa titla		Ů,			case
		Case title		Court Name			Pending
							On appeal
		Case number		Number Street			Concluded
		_	•	City State	e Zip Code		
Part 1	1:	Give Details About You	Business or C	onnections to Ar	ny Business		
27.	Witl	nin 4 years before you filed fo	r bankruptcy, did yo	ou own a business or	have any of the follow	ing connections to any	y business?
		A sole proprietor or self-em	ployed in a trade, pro	ofession, or other activi	ty, either full-time or part-	-time	
		A member of a limited liabi	lity company (LLC) o	r limited liability partner	rship (LLP)		
		A partner in a partnership An officer, director, or mana	aging executive of a	corporation			
		An owner of at least 5% of			on		
	✓	No. None of the above applies.	Go to Part 12.				
	\Box	Yes. Check all that apply above	and fill in the details b				
				Describe the na	ture of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
						Dates busine	an aviotad
		Number Street		Name of accour	ntant or bookkeeper	Dates busine	ss existed
		City State	Zip Code			From	То
				Describe the na	ture of the business		entification number Do not all Security number or ITIN.
		Business Name				EIN:	
		Number Street		_		Dates busine	ess existed
				Name of accour	ntant or bookkeeper	_	_
		City State	Zip Code			From	To
				Describe the na	ture of the business		entification number Do not all Security number or ITIN.
						EIN:	,
		Business Name					
		Number Street		Name of accour	ntant or bookkeeper	Dates busine	ss existed
		City State	Zip Code	_		From	To

Debtor 1	Raymun Gase 1	<u>.6-20991</u>	Doc 1		6/28/16			1 16 (1 16) (1 5 4: <u>38</u>	L	<u>es</u>	<u>с Ма</u>	<u>in</u>	
	First Name		Middle Name	Docui	ment ne	Page	51 of 69						
	hin 2 years before ditors, or other pa	•	bankruptcy, d	id you give a	ı financial st	atement t	o anyone abou	t your business? I	Includ	de all	financ	al institut	ions,
abla	No	alla la alacce											
ш	Yes. Fill in the deta	alis delow.		_									
				Da	te issued								
	Name			MN	//DD/YYYY								
	Number Street												
	City	State	Zip Coo										
	- Oity	Olalo	21p 000	uo									
	Sign Below												
I hav	re read the answer correct. I understa cruptcy case can re	and that makin	ng a false stat ıp to \$250,000	ement, conc	ealing prop	erty, or ob	taining money	under penalty of pr or property by frai J.S.C. §§ 152, 1341	ud in	conr	ection		true
I hav	re read the answer correct. I understa cruptcy case can re	and that makin esult in fines u	ng a false stat up to \$250,000 ebalo	ement, conc	ealing prop	erty, or ob	rtaining money	or property by frau	ud in	conr	ection		true
I hav	re read the answer correct. I understa cruptcy case can re	and that makin esult in fines u / Raymundo Are	ng a false stat up to \$250,000 ebalo	ement, conc	ealing prop	erty, or ob	rtaining money	or property by frai J.S.C. §§ 152, 1341	ud in	conr	ection		true
I hav and d bank	re read the answer correct. I understa cruptcy case can result of the second se	and that makin esult in fines u / Raymundo Are ature of Debtor 6/28/2016	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison	ealing prop nment for up	erty, or ob to 20 yea	staining money rs, or both. 18 to Signature Date	or property by frai J.S.C. §§ 152, 1341	ud in , 1519	conr 9, and	ection d 3571.		true
I hav and o bank	re read the answer correct. I understa cruptcy case can result of the second se	and that makin esult in fines u / Raymundo Are ature of Debtor 6/28/2016	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison	ealing prop nment for up	erty, or ob to 20 yea	staining money rs, or both. 18 to Signature Date	or property by frau J.S.C. §§ 152, 1341 of Debtor 2	ud in , 1519	conr 9, and	ection d 3571.		true
I hav and d bank	re read the answer correct. I understa cruptcy case can result of the second se	and that makin esult in fines u / Raymundo Are ature of Debtor 6/28/2016	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison	ealing prop nment for up	erty, or ob to 20 yea	staining money rs, or both. 18 to Signature Date	or property by frau J.S.C. §§ 152, 1341 of Debtor 2	ud in , 1519	conr 9, and	ection d 3571.		true
I hav and d bank	re read the answer correct. I understa cruptcy case can reside the second secon	And that making and that making a wall in fines under the state of Debtor 6/28/2016 anal pages to Y	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison nt of Financia	ealing prop nment for up al Affairs fo	erty, or ob to 20 yea r Individua	Signature Date Date Als Filing for Ba	or property by frau J.S.C. §§ 152, 1341 of Debtor 2	ud in , 1519	conr 9, and	ection d 3571.		true
Did y	re read the answer correct. I understa cruptcy case can reside the second secon	And that making and that making a wall in fines under the state of Debtor 6/28/2016 anal pages to Y	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison nt of Financia	ealing prop nment for up al Affairs fo	erty, or ob to 20 yea r Individua	Signature Date Date Als Filing for Ba	or property by frau J.S.C. §§ 152, 1341 of Debtor 2	ud in , 1519	conr 9, and	ection d 3571.		true
Did y	re read the answer correct. I understa cruptcy case can reserve the signal bate. Signal bate you attach addition No Yes	And that making esult in fines under the fines with the fines with the first that the first fines with the first f	ng a false stat up to \$250,000 ebalo 1	ement, conc), or imprison nt of Financia	ealing prop nment for up al Affairs fo	erty, or ob to 20 yea r Individua	x Signature Date Attach th	or property by frau J.S.C. §§ 152, 1341 of Debtor 2	ud in , 1519 I Form	conn 9, and m 107	r's Notice	with a	true

	Case 16-2099	1 Doc 1 Filed (06/28/16 Entered	1.06/28/16 16:54:38	Desc Main
Fill in this inform	ation to identify your cas		<i></i>	11/1/20/10 10:54:50	DC3C Main
Debtor 1	Raymundo		Arebalo		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
Official F	orm 108				Check if this is an amended filing
		on for Individu	uals Filing Und	der Chapter 7	

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: CREDIT ACCEPTANCE Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 048 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Debtor	Case 16-20991	Doc 1	Filed 06/28/16	Entered 06/28/16 16:54:38 Page 53 of 69 Lenown) —	B Desc Main
1	First Name	Middle Nam	e Läst Nam	ne age 33 01 03 known)	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the nformation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).			
Describe your unexpired personal property leases	Will the lease be assumed?		
Lessor's name:	□ No □ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Part 3: Sign Below			
Under penalty of perjury, I declare that I have indicated my intention that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal property		
✗ /s/ Raymundo Arebalo	×		
Signature of Debtor 1	Signature of Debtor 1		
Date 6/28/2016 MM/DD/YYYY	Date MM/DD/YYYY		

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		Hortiletti	District of illinois	
n re	Raymundo Arebalo Debtor	<u> </u>	Case No.	(If known)
	Deptor		Chapter	Chapter 7
			- Chapter	Onapier 7
	DISCLOSURE C	F COMPENSA	ATION OF ATTORNEY	FOR DEBTOR
1.	compensation paid to me within	one year before the filin	(b), I certify that I am the attorney for g of the petition in bankruptcy, or agr contemplation of or in connection w it	eed to be paid to me, for services
	For legal services, I have agreed	I to accept		\$1,425.00
	Prior to the filing of this stateme	nt I have received		\$0.00
	Balance Due			\$1,425.00
2.	The source of the compensation	paid to me was:		
	✓ Debtor	Other (s	pecify)	
3.	The source of the compensation	paid to me is:		
	✓ Debtor	Other (s	pecify)	
4.	I have not agreed to share to members and associates of		pensation with any other person unle	ess they are
		ny law firm. A copy of th	sation with a other person or persons be agreement, together with a list of t	
5.		_	ender legal service for all aspects of ndering advice to the debtor in deterr	
	b. Preparation and filing of	any petition, schedules,	statements of affairs and plan which	may be required;
	c. Representation of the del	otor at the meeting of cro	editors and confirmation hearing, and	any adjourned hearings thereof;
6.	By agreement with the debtor(s)	the above-disclosed fe	e does not include the following servi	ices:
		CE	RTIFICATION	
	I certify that the foregoing is a condebtor(s) in this bankruptcy proceed		agreement or arrangement for payn	nent to me for representation of
	6/28/2016		/s/ Angie Harb	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1425.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: June 28, 2016

,

Attornev

Yisroel Y. Moskovits

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

In re:	Arebalo, Raymundo	Case No
_	Debtor(s)	
		Chapter. Chapter7
	VERIFICA	TION OF CREDITOR MATRIX
	The above named Debtors hereby verify that	the attached list of creditors is true and correct to the best of their knowledge.
Date:	6/28/2016	/s/ Arebalo, Raymundo
		Arebalo, Raymundo
		Signature of Debtor

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CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037 USA

CITI PO BOX 6241 SIOUX FALLS , SD 57117 USA

WFDS PO BOX 19657 IRVINE , CA 92623 USA

LVNV FUNDING LLC PO BOX 740281 HOUSTON , TX 77274 USA

Stenger & Stenger 2618 East Paris Ave SE Grand Rapids , MI 49546 USA

EOS CCA PO BOX 981008 BOSTON, ME 02298 USA

TMobile P.O. Box 742596 Cincinnati , OH 45274 USA

St Margaret- Mercy Hospital 24 Joliet Dr Dyer , IN 46311 USA

BLEECKER BRODEY&ANDREWS 9247 N MERIDIAN #101 Indianapolis , IN 46260 USA

Lake Surgical Associates LLC 10110 Donald Powers Dr Suite 202 Munster , IN 46321 USA

Community Care Network Inc PO Box 1297 Bedford Park , IL 60499 USA

Franciscan Alliance, Inc. 28044 Network Place Chicago , IL 60673 USA Case 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main ed Revenue Group Document Page 63 of 69

Mira Med Revenue Group Dept 77304 PO Box 77000 Detroit , MI 48277 USA

St Anthony Hospital 301 W Homer St Michigan City , IN 46360 USA

NIPSCO 801 E 86th Ave Merrillville , IN 46410 USA

Fountain View Apartments 9614 Granada Ct Apt#119 Crown Point , IN 46307 USA

Prairie Point Apartments 9123 Cleveland St Merrillville , IN 46410 USA

IL Dept of Health & Family Serv PO Box 19405 Springfield , IL 62794 USA

CHILD SUPPORT EN/IL 100 S GRAND AV EAST Springfield , IL 62705 USA

Advance America 1500 S Lake St Mundelein , IL 60060 USA

Hogue, Erin 688 Regents Drive Crystal Lake , IL 60014 USA

Documente Page 64 of 69 Part 6: Answer These Questions for Reporting Purposes 16a, Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ☐ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? 25,001-50,000 1,000-5,000 **7** 1-49 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that More than 100,000 10,001-25,000 100-199 you owe? 200-999 \$500,000,001-\$1 billion \$0-\$50,000 \$1,000,001-\$10 million 19. How much do you \$1,000,000,001-\$10 billion \$10,000,001-\$50 million \$50,001-\$100,000 estimate your assets \$10,000,000,001-\$50 billion **\$100,001-\$500,000** \$50,000,001-\$100 million to be worth? ☐ More than \$50 billion \$500,001-\$1 million \$100,000,001-\$500 million \$500,000,001-\$1 billion \$0-\$50.000 \$1,000,001-\$10 million 20. How much do you \$10,000,001-\$50 million \$1,000,000,001-\$10 billion \$50,001-\$100,000 estimate your \$10,000,000,001-\$50 billion \$50,000,001-\$100 million \$100,001-\$500,000 liabilities to be? More than \$50 billion \$500,001-\$1 million \$100,000,001-\$500 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Raymundo Arebalo Signature of Debtor 2 Signature of Debtor 1 Executed on ___6/28/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main Case 16-20991 Fill in this information to identify your case: Debtor 1 Raymundo Arebalo Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern District of Illinois United States Bankruptcy Court for the: (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Part 1: Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119).

Signature of Debtor 2

MM/DD/YYYY

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

that they are true and correct.

/s/ Raymundo Arebalo Signature of Debtor 1

MM/DD/YYYY

Date 6/28/2016

Debto		iled ogganto Entered egganta into 28 Descivain
	First Name Middle Name	Document Page 66 of 69
	Within 2 years before you filed for bankruptcy, did yo creditors, or other parties.	u give a financial statement to anyone about your business? Include all financial institutions,
ŗ	▼ No	
Ī	Yes. Fill in the details below.	
		Date issued
	Name	MM/DD/YYYY
	Number Street	
	City State Zip Code	
Part 1	12: Sign Below	
an	nd correct. I understand that making a false statemen ankruptcy case can result in fines up to \$250,000, or ir	Affairs and any attachments, and I declare under penalty of perjury that the answers are true it, concealing property, or obtaining money or property by fraud in connection with a inprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debtor 1	Signature of Debtor 2
	Date 6/28/2016	Date
Die	id you attach additional pages to Your Statement of F	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
V	N o	
Ē	Yes	
Die	id you pay or agree to pay someone who is not an atto	orney to help you fill out bankruptcy forms?
₽.		
	No .	
È	No Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main DocumAcentalo Page 67 of 69 number (if Debtor Raymundo Middle Name First Name Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases No Lessor's name: Yes Description of leased property: П No Lessor's name: Yes Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Description of leased property:

Part 3: Sign Below

1

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

×	/s/ Raymundo Arebalo	Reynob am IIT	×	
	Signature of Debtor 1	0	Signature of Debtor 1	
	Date 6/28/2016 MM/DD/YYYY		Date MM/DD/YYYY	

Case 16-20991 Doc 1 Filed 06/28/16 Entered 06/28/16 16:54:38 Desc Main UNITED SHAPE'S BANKED PROVIDENT Northern District of Illinois

ın re:	Arebaio, Raymundo	Case No	
_	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MATE	RIX
	The above named Debtors hereby verify that	the attached list of creditors is true ar	d correct to the best of their knowledge.
Date:	6/28/2016	/s/ Arebalo, Raymund Arebalo, Raymundo Signature of Debtor	to Rugalo alle TIT

Case 16-20991 Doc 1	Filed 06/28/16		6/28/16:16:5	4: <u>38 Desc M</u>	ain
First Name Middle Name	DOCUM@Nime	De	69 lumn A btor 1	Column B Debtor 2 or non-filing spouse	
8. Unemployment compensation Do not enter the amount if you contend that the amount if Social Security Act. Instead, list it here:	received was a benefit unde	\$ <u>0</u>	00		
For your spouse	<u>\$0.00</u> \$0.00				
9.Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.			00	-	
10.Income from all other sources not listed above.Sp Do not include any benefits received under the Social St received as a victim of a war crime, a crime against hun domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payments nanity, or international or				
Total amounts from separate pages, if any.		+ <u>\$</u> (0.00	+]=[]
Calculate your total current monthly income. Add column. Then add the total for Column A to	lines 2 through 10 for each ir Column B.	\$ <u>4,</u>	199.05		\$4,199.05 Total current
Part 2: Determine Whether the Means Test A	pplies to You				monthly income
12. Calculate your current monthly income for the year					
12a. Copy your total current monthly income from line 11			Copy li	ine 11 here \rightarrow	\$4,199.05
Multiply by 12 (the number of months in a year).					
12b. The result is your annual income for this part of the form.					
13 Calculate the median family income that applies to	**************************************				
Fill in the state in which you live.	Illinois				
Fill in the number of people in your household.	3				
Fill in the median family income for your state and size of household.					
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.					
14. How do the lines compare?					
14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.					
14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.					
Part 3: Sign Below					<u> </u>
By signing here, I declare under penalty of perjury that the	ne information on this stater	ment and in any at	tachments is true and	і соггест.	
Signature of Debtor 1	W III	Signature of D	ebtor 2	·	-
Date 6/28/2016 MM/DD/YYYY		Date 6/28/201 MM/DE			
If you checked line 14a, do NOT fill out or file Form 12 If you checked line 14b, fill out Form 122A-2 and file it	2A-2. with this form.				